	PAT	ENT APPLI	CATIO	N FEE DETE tute for Form P	ERMINATIO	100 8 COO	action of th	formation unles	Ap o ik	DEPARTMENT (lays a valid OME	control number	
APPLICATION AS FILED PART I (Cotumn 1) (Cotumn 2) SMALL ENTITY									OR	OTHER THAN OR SMALL ENTITY		
FOR		NUMI	NUMBER FILED		NUMBER EXTRA		PATE (\$)	FEE (\$)		RATE (\$)	FEE (S)	
BASIC FEE (37 CFR 1.15(a), (b), or (c))		(c))						150		I WILL W	1	
SE	VRCH FEE CFR 1.18(1), (1), or (1							100		·	 	
EX	MINATION FEE					1				<u> </u>	 	
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS		16				 -		300			 	
(37 CFR 1.16(I)) INDEPENDENT CLAIMS			minus 2	0 - 1	·	│	•	<u> </u>	OR	X =	ļ <u>.</u>	
(37 CFR 1.16(h))			eunim	and drawings		<u> ×</u>				X =		
	LICATION SIZE	sheets o	f paper, t	he application s	ize fee due				1			
FE (37	CFR 1.16(s))	additions	al 50 she	small entity) for ets or fraction th	ereof. See]			1	
_		35 U.S.C	. 41(a)(1)(G) and 37 CF	R 1.16(s).	_						
WU	LTIPLE DEPEND	ENT CLAIM PRE	SENT (37	CFR 1.16(j))	_ \	╵┖		180.				
If the difference in column 1 is less than zero, enter 'O' in column 2.							TOTAL		-	TOTAL		
	APPI	ICATION AS	AMENO	ED – PART II					•			
7	-100	S TON THO	MILIAD	LD - FART II						OTHE	D THAN	
<u>(</u>	(Column 1) (Column 2) (Column 3)						SMALL ENTITY			OR OTHER THAN SMALL ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE (\$)	ADDI-/ TIONAL FEE (5)		RATE (\$)	ADDI- TIONAL FEE (3)	
	Total (37 CFR 1.18(9))	. 10	Minus,	20	0	×			OR	X =	122(4)	
	Independent O7 CFR 1.18(A))	. 15	Minus	- 3	- 1	×		X				
	Application Size Fee (37 CFR 1:16(s))					 ^ -		$\overline{}$	OR	× -		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160))								OR		† · · · · · ·	
							TAL/ D'L/FEE	0,	OR	TOTAL ADD'L FEE		
		(Column 1)	,	(Column 2)	(Column 3)							
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
늣	Total (27 CFR 1.15(1))	•	Minus	•	•	×			OR	х -	1	
MENT	Independent (37 CFR 1.18(N))	•	Minus	•••	•	×					 	
₹		Application Size Fee (37 CFR 1.16(s))							OR	X =	 	
₹	Application Size		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16())								 	
AMENDMENT		TION OF MULTIPLE	E DEPENDI	ENT CLAIM (37 CF	R 1.16(1)			I	OR			

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form anti/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.